

Entered - 3-27-01- sb  
CL - 01L0198 ALEXIS HOLMES

CLAIM OF: **EDWIN L. OATES, JR.**  
1771 Surrey Hill Circle  
Lawrenceville, Georgia 3044

01- R -0866

For damages alleged to have been sustained as a result of a vehicular accident on February 25, 2001 at 447 Flat Shoals Avenue at Metropolitan Avenue.

BY PUBLIC SAFETY AND  
LEGAL ADMINISTRATION COMMITTEE:

BE IT RESOLVED by the Council of the City of Atlanta that the action of the Department of Law be approved in authorizing payment to **EDWIN L. OATES, JR.** the sum of \$774.71 in full settlement and satisfaction of all claims, past, present and future, of every kind and character for damages alleged to have been sustained as a result of a vehicular accident on February 25, 2001 at 447 Flat Shoals Avenue at Metropolitan Avenue as is more particularly set forth in the within claim; said sum taken from and charged to account 1A01/529017/T31001, Settlement of Suits and Claims, Department of Law.

APPROVED: SUSAN PEASE LANGFORD  
CITY ATTORNEY

BY:

  
ROSALIND RUBENS NEWELL  
DEPUTY CITY ATTORNEY

DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY

Claim No. 01L0198

Date: 5/16/01

Claimant /Victim EDWIN L. OATES, JR.

BY: (Atty)(Ins.) \_\_\_\_\_

Address: 1771 Surrey Hill Circle Lawrenceville, Georgia 30044

Subrogation: Claim for Property damage \$ 774.71 Bodily Injury \$ \_\_\_\_\_

Date of Notice: 3/16/01 Method: Written, proper X Improper \_\_\_\_\_

Conforms to Notice: O.C.G.A. §36-33-5 X Ante Litem (6 Mo.) X

Date of Occurrence 2/25/01 Place: 447 Flat Shoals Avenue at Metropolitan Avenue

Department Fire Division: Battalion Five

Employee involved FAO Tony Gates Disciplinary Action: Letter of reprimand

**NATURE OF CLAIM:** The claimant sustained vehicular damage to the front bumper of his vehicle when a City of Atlanta fire truck was backing up into the fire station.

**INVESTIGATION:**

Statements: City employee \_\_\_\_\_ Claimant \_\_\_\_\_ Other \_\_\_\_\_ Written X Oral \_\_\_\_\_

Pictures \_\_\_\_\_ Diagrams \_\_\_\_\_ Reports: Police X Dept Report X Other \_\_\_\_\_

Traffic citations issued: City Driver X Claimant Driver \_\_\_\_\_

Citation disposition: City Driver \_\_\_\_\_ Claimant Driver \_\_\_\_\_

**BASIS OF RECOMMENDATION:**

Function: Governmental X Ministerial \_\_\_\_\_

Improper Notice \_\_\_\_\_ More than Six Months \_\_\_\_\_ Other \_\_\_\_\_ Damages reasonable X

City not involved \_\_\_\_\_ Offer rejected \_\_\_\_\_ Compromise settlement \_\_\_\_\_

Repair/replacement by Ins. Co. \_\_\_\_\_ Repair/replacement by City Forces \_\_\_\_\_

Claimant Negligent \_\_\_\_\_ City Negligent X Joint \_\_\_\_\_ Claim Abandoned \_\_\_\_\_

Respectfully submitted,

  
INVESTIGATOR - ALEXIS HOLMES

**RECOMMENDATION:**

Pay \$ 774.71 Adverse \_\_\_\_\_ Account charged: 1A01 X 2J01 \_\_\_\_\_ 2H01 \_\_\_\_\_

Claims Manager:  Concur/date 05-17-01

Committee Action: \_\_\_\_\_ Council Action \_\_\_\_\_

COUNCIL OF THE CITY OF ATLANTA  
MUNICIPAL CLERK  
City Hall  
55 Trinity Avenue, S.W.  
Atlanta, Georgia 30335

MAR 16 2001

RE: CLAIM FOR DAMAGES

Today's Date: 3-11-01

Dear Municipal Clerk: re: Accident Report #010560723

03-16-01 10:43:33  
ENTERED - 3-27-01 - SB  
01L0198 - ALEXIS HOLMES

This is to notify the City of Atlanta that I have suffered damages in the amount sum of \$ 774.71 property and/or \$ 0 bodily injury for which I contend the City is liable.

1. Date of incident: February 25, 2001 2. Time of Incident: Approx 10:30AM 3. Police called: ✓  
(month/day/year) Yes No

4. Location of incident (including street address): near 447 Flat Shoals Ave (near intersection of Metropolitan Ave.)

5. Name of your insurance company: GEICO Policy No. 289-06-56

6. State what and how incident occurred: Traveling south on Flat Shoals Ave, we noticed a stopped Fire City of Atlanta Fire Truck ahead of us. A fireman got out & directed us to stop. I completely stopped our vehicle at the place the fireman directed. The fire truck at the direction of the same fireman started backing up; when I realized the fire truck would hit us if it continued, I steadily blew the horn, but the fire truck did not stop until it hit our car, damaging the front bumper. Meanwhile the fireman ran out of the way.

7. ALL ESTIMATES AND DAMAGES ARE SUBJECT TO INSPECTION. THE MAKING OF FALSE CLAIMS WILL RESULT IN YOUR CLAIM BEING DENIED AND MAY RESULT IN CRIMINAL PROSECUTION!

8. The registered owner must make the claim for vehicle damages, complete the following and attach two (2) estimates of repair and proof of ownership of your vehicle (copy of the current tag receipt or title).

Your vehicle: Ford (Escort) 1989 799LBK Edwin L. Oates, Jr.  
(Make) (Year) (Tag Number) (Driver's Name)

City vehicle: Spartan per Fire Dept Info # 404-8537000 Tony A. Gates Fire Dept  
(Make) (City Driver's Name) (Department/Bureau)

9. Witness: Lulita U. Oates 1771 Surrey Hill Circle Lawrenceville, GA 30044 770 513 1908  
(Name) (Address) (Telephone Number)

10. The acknowledgment of this claim in no way waives the Sovereign immunity of the City of Atlanta, as granted by State law, nor is it an admission of liability on behalf of the City of Atlanta and/or its employee(s).

11. This claim should be mailed immediately to the address shown above.

I HEREBY SWEAR OR AFFIRM THAT THE ABOVE INFORMATION IS TRUE AND CORRECT.

Edwin L. Oates, Jr.  
Signature of Claimant

Edwin L. Oates, Jr.  
(Print Claimant's Name)

1771 Surrey Hill Circle  
(Address)

Lawrenceville, GA 30044  
(City, State and Zip Code)

770 963-7369 770-513-1908  
(Work Number) (Home Number)

GENERAL RELEASE AND INDEMNIFICATION

CLAIM NUMBER 01L0198

\$ 774.71

IN CONSIDERATION of the sum of SEVEN HUNDRED AND SEVENTY-FOUR AND 71/100  
\_\_\_\_\_ DOLLARS, to be paid to me by the CITY OF ATLANTA, the future receipt of which is hereby  
acknowledged, I do hereby, for myself, my heirs, executors, administrators, and assigns, release and forever  
discharge said City, its officers and employees, including but not limited to Tony A. Gates, from any and all  
claims, demands, actions, causes of action, suits, damages, loss and expenses, of whatsoever kind or nature for or  
on account of anything that has heretofore occurred, and particularly for or on account of vehicular accident  
which occurred on or about the 25th day of February, 2001  
at or near 447 Flat Shoals Avenue at Metropolitan Avenue.

It is further understood and agreed that the payment of the above named sum is not to be considered as an  
admission on the part of the City, its officers, agents, servants or employees, of any liability whatsoever and the  
undersigned further covenants and agrees to indemnify and hold harmless the City of Atlanta, its officers, agents,  
servants and employees, from any and all claims, damages or costs which the said City of Atlanta, its officers,  
agents, servants and employees, may be called upon to make as a result of the event hereinbefore referred to.

And I now state that the only consideration for my signing this release and indemnification is the payment  
of the sum stated above; that no other promise or agreement of any kind or nature has been made to or with me by  
said City or its agents to cause me to sign this release, and that I fully understand the meaning and intent of this  
instrument.

WITNESS my hand and seal this 20th day of May, 2001.

Edwin L. Oates, Jr. (LS)  
EDWIN L. OATES, Jr.

The above release was read and explained to, and signed by the said Edwin L. Oates, Jr.

\_\_\_\_\_ in our presence on the date above written.

Palita W. Oates  
Angela Oates  
WITNESSES

01- R-0866